



Public Health Workforce & Infrastructure

NCSL State Public Health Symposium

June 23, 2023

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Workforce and Infrastructure



The **public health workforce** plays an essential role in securing the vital conditions for optimal health and well-being for all to thrive. A *diverse, engaged, well-resourced, well-trained* public health workforce can meet the demands of public health today and prepare for the needs of tomorrow.



ASTHO Profile Survey

The ASTHO Profile of State and Territorial Public Health is a **longitudinal survey** that began in 2007 and is **fielded every three years** to health agencies in all 50 states, the District of Columbia, and 8 island jurisdictions **with funding from the Robert Wood Johnson Foundation and CDC**. ASTHO's Profile survey is the most comprehensive source of data on state and territorial health agencies, and **captures data on these core infrastructure areas:**



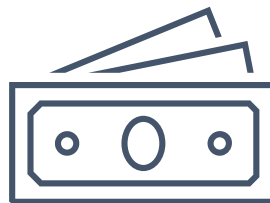
Activities



Structure and Governance



Workforce



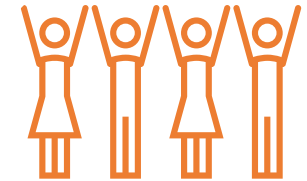
Finance and Expenditures



Quality Improvement



Informatics



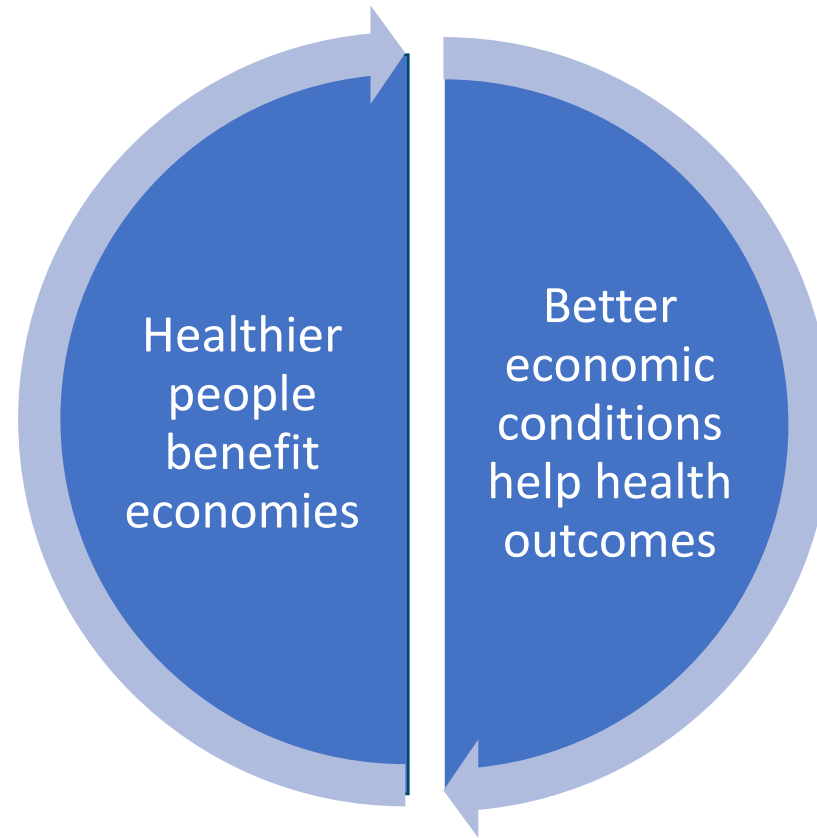
Health Equity

Governance Classification subsection added in 2022 (but will not likely be in 2025)

New sections added in 2022

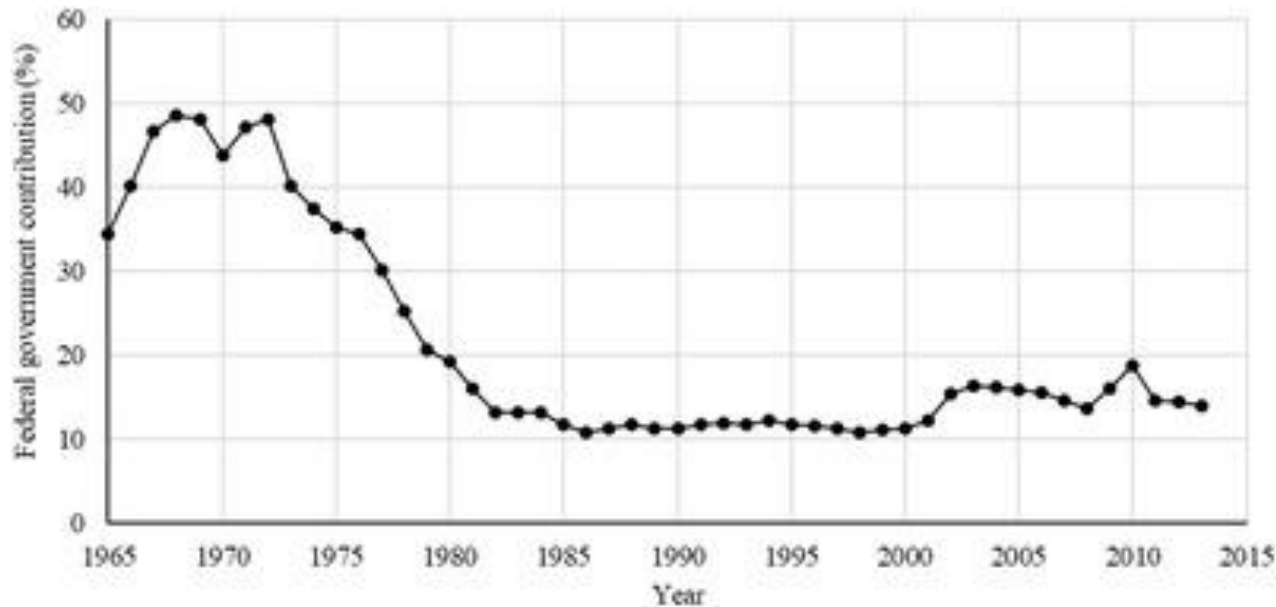
Public Health Funding has Declined as the Population has Increased

As population increased from 2010 to 2018, **overall expenditures** by public health agencies **declined by 10.3%** (a difference in billions)

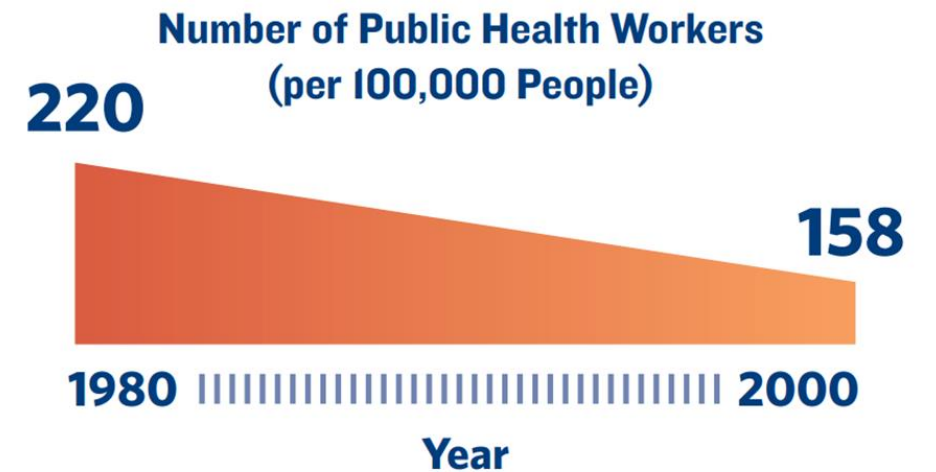


[Source: New Data on State Health Agencies Shows Shrinking Workforce and Decreased Funding Leading Up to the COVID-19 Pandemic | ASTHO](#)

Over 7 years prior to COVID-19, state health departments alone lost over 10,000 positions



The ratio of public health workforce to US population has decreased drastically



[Source: New Data on State Health Agencies Shows Shrinking Workforce and Decreased Funding Leading Up to the COVID-19 Pandemic | ASTHO](#)



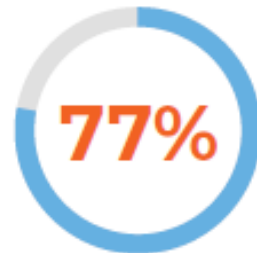
The Problem

Nearly half of state and local public health employees left their organizations from 2017 to 2021, creating a critical lack of skills and experience across the nation.

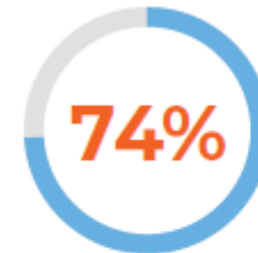
WHO LEFT



of state and local **public health employees**



of employees with **<5 years' experience** at their organizations



of employees **under age 35**

The Workforce is Experiencing Burnout

56 % of the public health workforce reported at least one symptom of PTSD

25% of the public health workforce are considering leaving their position



Why it matters

In addition to eroding services, this loss of public health experience and institutional knowledge puts communities at significant risk for infectious diseases and other health crises.

SERVICES AT RISK



Chronic disease



Maternal and child health



Injury prevention



Environmental health

IF TRENDS CONTINUE



nearly 130,000

staff will have left their jobs by 2025

This is on top of an **existing shortage** of

80,000 staff

needed to provide basic, necessary, public health services.

Public Health Workforce Challenges



Overall decline in quantity and quality of applications



Lack ability to offer competitive pay and hiring incentives such as loan repayment



Limitations due to outdated HR systems, rules, and procedures



Working within union/civil service environment



Existing policies that prevent attracting a diverse and younger workforce

Public Health Infrastructure Challenges



**“BOOM AND
BUST”
FUNDING**



**DISEASE-
SPECIFIC
FUNDING**



**LARGE
PORTION OF
BUDGET
COMES FROM
GRANTS**



**ANTIQUATED
TECHNOLOGY
AND DATA
SYSTEMS**

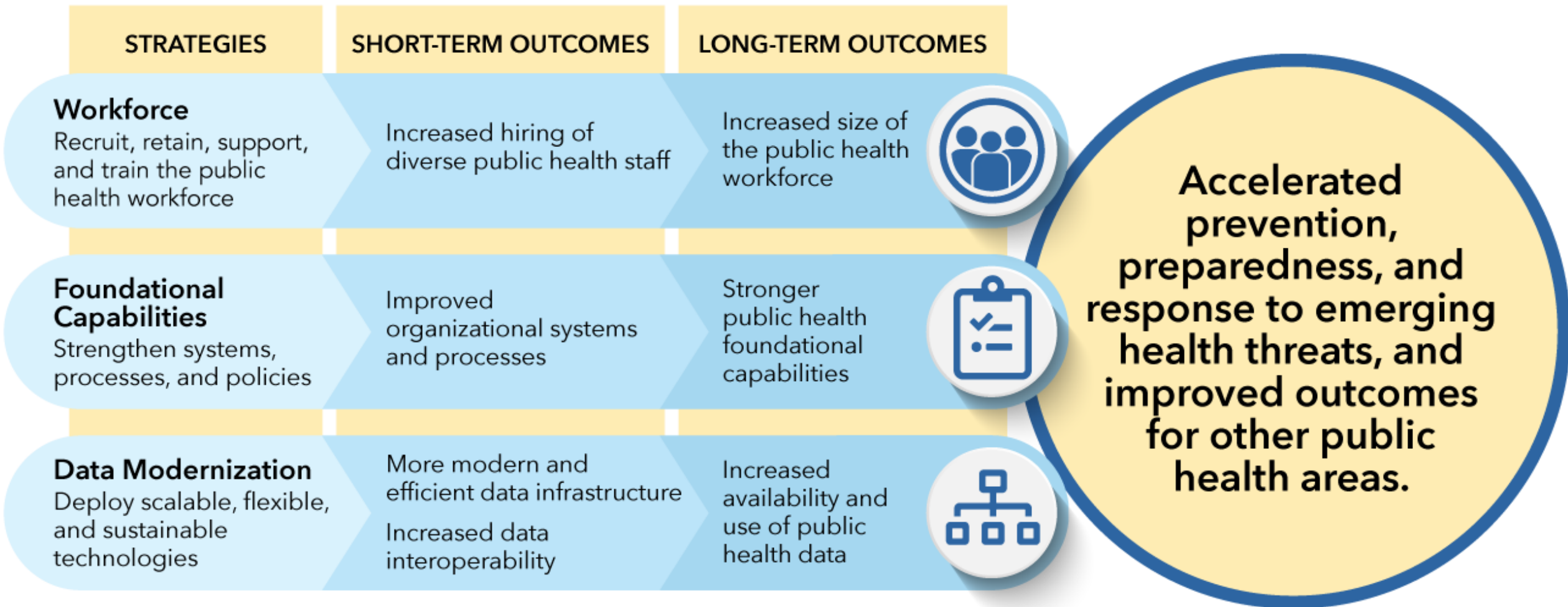


**INSUFFICIENT
LAB CAPACITY**



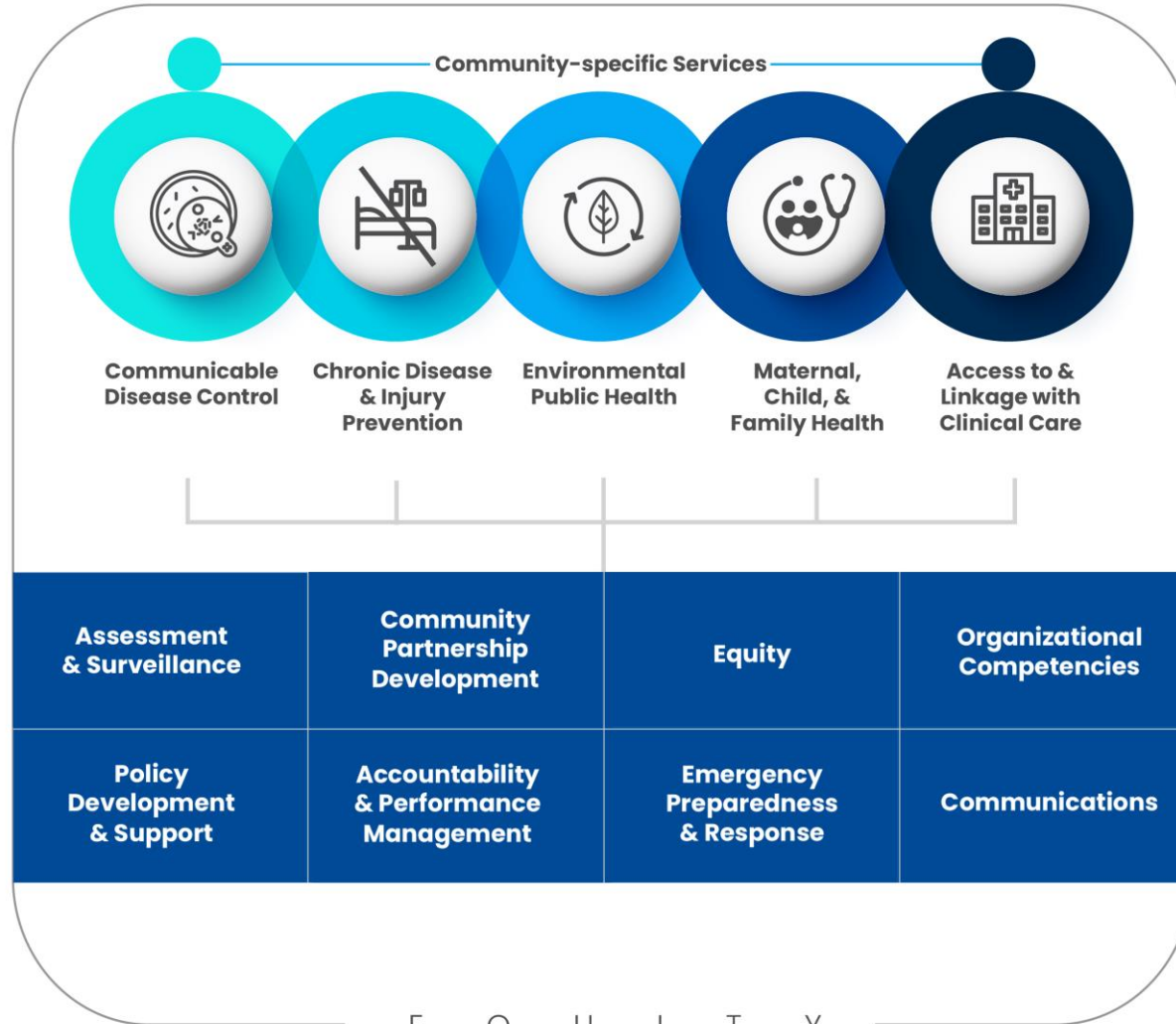
**UNDER-
RESOURCED
WORKFORCE**

Public Health Infrastructure Grant (CDC)



Foundational Public Health Services

Foundational Areas



February 2022

Public Health Infrastructure Grant National Technical Assistance Partners



ASTHO's Capacity Building Approach

Workforce & Leadership Development

- Peer to Peer Connection
- Improved Workforce Wellbeing & Retention
- Improved Pipelines, Recruitment and Hiring Mechanisms
- Supervisory & Leadership Skill Building

Foundational Capabilities

- Improved Knowledge of Foundational Capabilities
- Strengthened Financial & Administrative Processes
- Improved Planning and Systems

Data Modernization

- Peer to Peer Connection
- Improved Understanding & Implementation Approaches to Data & Data Systems
- Infrastructure Sustainability

Legislative Trends

Efforts to sustain funding

- Ex: NV, IN, MD

Increasing public health workforce capacity

- Ex: CA, TN

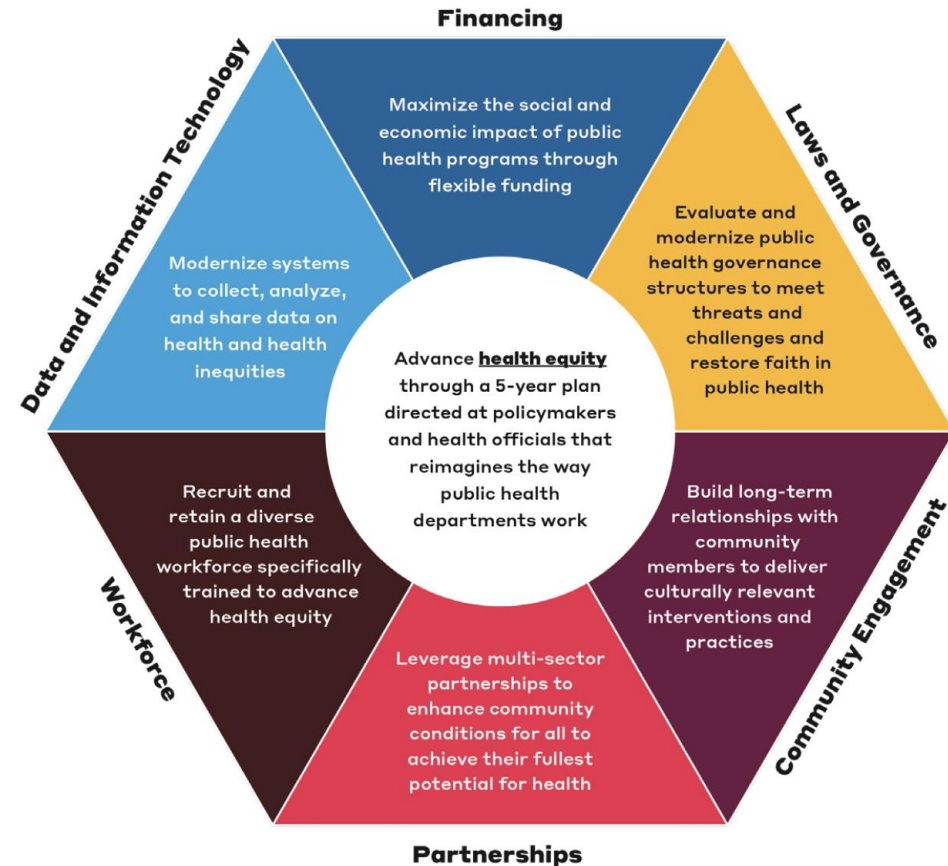
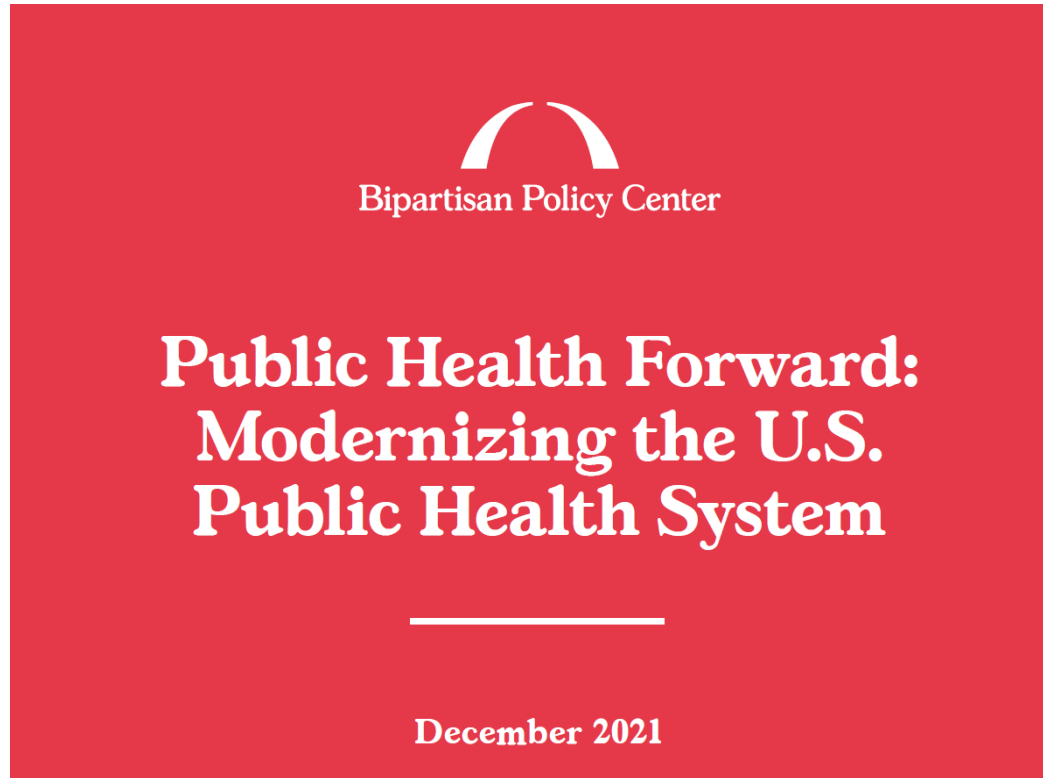
Expanding community partnerships

- Ex: CO

Data sharing

- Ex: MD, OK

Recommended Actions for Policymakers



Recommended Actions for Policymakers

• Financing

- Provide flexible funding and maximize existing resources to support public health services and capabilities.
- Support public health system evaluations and study commissions.

• Data

- Invest in modern, efficient, and interoperable information technology.
- Invest in data sharing between public health and health care.

• Workforce

- Support statewide public health workforce needs assessments.
- Modernize civil service requirements and institute competitive pay structures.

Recommended Actions for Policymakers

- **Governance**

- Conduct bipartisan, comprehensive review of existing policies and revise as needed.

- **Partnerships**

- Incentivize partnerships between public health departments and other sectors.
- Establish a body to monitor, assess, and influence implications for health in all policies.

- **Community Engagement**

- Allocate funds to support the capacity building of community-based organizations.
- Allocate funds to public health for community collaboration.

Other Ideas

- Build relationships with state and local health departments in your jurisdiction
- Reassess professional licensing requirements to retain and expand the public health workforce.
- Create mental and behavioral health supports for public health workers and organizations.
- Protect public officials, including public health workers, from threats, intimidation, and harassment.
- Explore PH WINS and ASTHO Profile Dashboards to learn more about the public health infrastructure in your state.

<https://www.phwins.org>

PH WINS DASHBOARDS HOME NATIONAL SUBGROUPS RESOURCES

Welcome to the Public Health Workforce Interests and Needs Survey (PH WINS) national dashboards. PH WINS is the first and only nationally representative source of data on the people that make up the governmental public health workforce. It captures their perspectives on several key topics as well as their demographics.

PH WINS
PUBLIC HEALTH WORKFORCE INTERESTS AND NEEDS SURVEY

de Beaumont astho

DASHBOARDS

Use these dashboards to explore the national findings from PH WINS 2021. To examine the data in more detail, try applying filters, comparing subsets of the workforce, or selecting a topic or subgroup of interest.

TOPIC
Staying & Leaving

INTENT TO LEAVE
NATIONAL: ALL EMPLOYEES

Percentage of Employees (%)

Category	Percentage
Leaving in one year	27%
Retiring in five years	20%
Staying	69%

* This change is statistically significant at a 95% confidence level. Significant changes are shown in red.
CAUTION: "Leaving in one year" reflects those who are considering leaving their organization in 12 months. "Retiring in five years" reflects those who are considering retiring in the next five years.

DASHBOARD TOPICS

Use the buttons below to explore national-level data by different key PH WINS 2021 topics.

DEMOGRAPHICS

TRAINING NEEDS

WORKFORCE CHARACTERISTICS

ENGAGEMENT & SATISFACTION

STAYING & LEAVING

WELL-BEING

<https://www.astho.org/profile>

astho Profile of State and Territorial Public Health

About Dashboard
The ASTHO Profile Survey dashboard presents comprehensive data on public health agency activities, structure, and resources for all 50 states, DC, and the U.S. territories and freely associated states.

Individual agency profiles can be accessed by clicking on the specific state or territory of interest on the map.

American Samoa (No data available.) CNMI FSM Guam Puerto Rico Republic of Palau RMI US Virgin Islands

